PATENT	APPLICATION	SERIAL	NO.	

U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE FEE RECORD SHEET

04/06/2004 SSANDARA 00000017 10811768

01 FC:1001 02 FC:1201 03 FC:1202 770.00 OP 172.00 OP 54.00 OP

PTO-1556 (5/87)

PTO/SB/05 (01-04)

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UTILITY PATENT APPLICATION **TRANSMITTAL**

CU-3664 RJS Attorney Docket No. Kiyoshi OOI et al First Inventor SEMICONDUCTOR DEVICE SUBSTRATE, SEMICONDUCTOR Title 408339440 Express Mail Label No.

(Only for new nonprovisional applications under 37 CFR 1.53(b))

	M. H. M					
APPLICATION ELEMENTS	Mail Stop Patent Application ADDESC TO: Commissioner for Patents					
1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	ADDRESS 10. P.O. Box 1450					
See in Er Giapier coo concerning during pareria appacement contenta.	Alexandria VA 22313-1450 O					
See MPEP chapter 600 concerning utility patent application contents. 1. X Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing) Applicant claims small entity status. See 37 CFR 1.27. 3. X Specification [Total Pages36] (preferred arrangement set forth below) - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstrect of the Disclosure 4. X Drawing(s) (35 U.S.C. 113) [Total Sheets5] 5. Oath or Declaration [Total Sheets5] a. X Newly executed (original or copy) b. Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed) i. DELETION OF INVENTOR(S) Signed statement attached deteting Inventor(s) name in the prior application, see 37 CFR	7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, ell necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. Paper c. Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS 9. X Assignment Papers (cover sheet & document(s)) 10. 37 CFR 3.73(b) Statement Power of (when there is an essignee) Attorney 11. English Translation Document (if applicable) 12. X Information Disclosure X Copies of IDS Statement (IDS/PTO-1449 Citations 2 13. Preliminary Amendment 14. X Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. X Certified Copy of Priority Document(s) (if foreign priority is claimed)					
1.63(d)(2) and 1.33(b).	16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(I). Applicant must attach form PTO/SB/35					
6. Application Data Sheet. See 37 CFR 1.76	or its equivalent. Other:					
10 K a CONTINUING ADDI ICATION shock assemble has and asset						
18. If a CONTINUING APPLICATION, check appropriate box, and sup specification following the title, or in an Application Data Sheet under 3						
Continuation Divisional Continua	tion-in-part (CIP) of prior application No.:					
Prior application information: Examiner	Art Unit:					
For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the 5b, is considered a part of the disclosure of the accompanying continuation						
The incorporation can only be relied upon when a portion has been inadvert	lently omitted from the submitted application parts.					
19. CORRESPONI						
Customer Number: 26530	OR Correspondence address below					
Customer Number: 26530	OR LI Correspondence address below					
Name						
Address						
City	State Zip Code					
Country	elephone Fax					
Name (Print/Type) Richard J. Streit	Fjegistra the No-(Att mouth gent) 25765					
Signature	Date 03/29/2004					

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 22 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application term to the USPTO. Time will vary depending upon the Individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Petent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

CLAIMS AS FILED - PART I					SMALL ENTITY				OTHER THAN			
(Column 1) (Column 2)					ımn 2)		TYPE			OR SMALL ENTITY		
TOTAL CLAIMS		23			1		RATE	FEE	7	RATE	FEE	
FOR		NUMBER	NUMBER FILED		NUMBER EXTRA		BASIC FE	E 385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			23 mi	23 minus 20= '		· 3		X\$ 9=		OR	X\$18=	54
INDEPENDENT CLAIMS 5 minus 3 = 1				2	<u></u>		X43=		OR	X86=	172	
MULTIPLE DEPENDENT CLAIM PRESENT							+145=		OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2						ı	TOTAL		OR	TOTAL		
CLAIMS AS AMENDED - PART II											OTHER	THAN
		(Column 1)		(Colun	nn 2)	(Column 3)		SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	* ENTATION OF MI	Minus	***	CLAIM	=		X43=		OR	X86=	
	10, 14,		JETIPLE DEF	ENDENI	CLAIM		ן י	+145=		OR	+290=	· ·
						L	TOTAL DDIT. FEE		OR	TOTAL ADDIT, FEE		
		(Column 1)		(Colum	n 2)	(Column 3)						
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	##	•	=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		= .		X43=		OR	X86=	
_	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT	CLAIM	· []	l ├					
							L	+145=		OR	+290=	
							AI	TOTAL ODIT. FEE		OR ,	TOTAL ADDIT. FEE	
		(Column 1)		(Colum	n [.] 2)	(Column 3)						·
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOL PAID F	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent		Minus	***		=		X43=	•	OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					-			^{Un}			
* If the entry in column 1 is less than the entry in column 2 write "0" in column 2									+290=			
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."								OR	TOTAL DDIT. FEE			
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												